

A Montana Community Transformation Grant Clinical Success Story

Controlling high blood pressure is an important challenge for individuals and healthcare providers in the US. High blood pressure is a major risk factor for heart disease, stroke, and kidney failure. One in every three Americans has hypertension. But despite the availability of effective medication and diet, less than half of those with known high blood pressure are controlled. Comprehensive quality improvement (QI) efforts have shown that organized team based care is effective in improving hypertension control in a group of patients. Multifaceted strategies for team-based hypertension care include the development and implementation of a hypertension treatment protocol and registry, decision support systems, and the outreach capability for self-care education and follow-up. With the widespread adoption of electronic health records, many health care organizations now have the information systems for such activities. But clinical organizations have to take on the task of developing their own specific programs using their own information systems and health care teams. The Physician Quality Reporting System (PQRS) incentives are designed to encourage healthcare providers to use their health information systems to improve the quality of care. Providers can choose from a number of measures. To achieve some measures requires less time and effort than to implement the complex, cross-cutting interventions needed to address hypertension screening and control. In Montana, Department of Public Health and Human Services Community Transformation Grant funds provided the impetus for one of the state's major health care systems to develop a successful and sustainable multifaceted program to improve screening and treatment for hypertension.

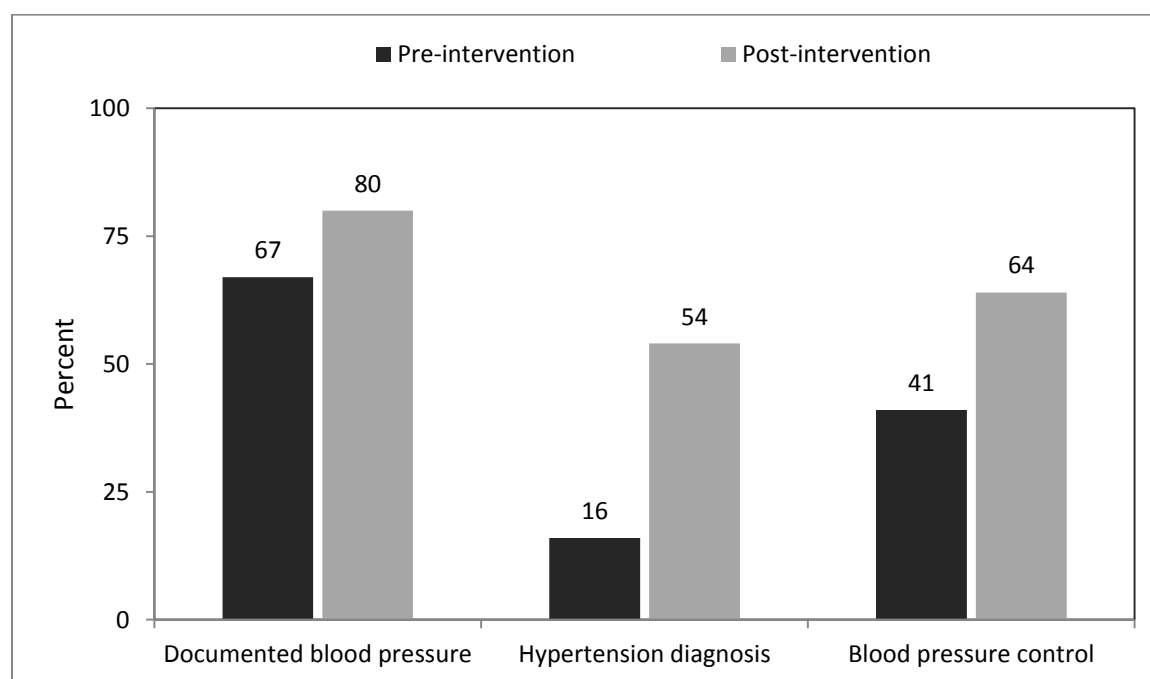
Benefis Health System is a nonprofit independent health care system based in the city of Great Falls, Montana. The system includes a 516-bed hospital, an extended care and rehabilitation facility and a medical group of 110 employed physicians and advanced practice professionals including three primary care practices with over 13,000 adult patients. In December of 2012, Benefis responded to a proposal to collect PQRS data about hypertension and to implement quality improvement activities in a primary care setting. NextGen, their electronic health record had the capability of establishing a hypertension registry, but they had not formally established such a registry for the estimated 1200 patients with hypertension being followed in their system. Their practices had not submitted quality data for PQRS but intended to begin the process in the near future. By mid-January of 2013, they had formally identified PQRS measure #317 Preventive Care and Screening as their goal. Their multidisciplinary team working on the project included healthcare providers from Internal Medicine, Family Practice and Ob-Gyn along with administrative, information technology (IT), and QI support.

The team joined the American Medical Group Foundation's Measure Up/Pressure Down blood pressure campaign and participated in ten online conferences over the following seven months. As part of this campaign, they were able to access and utilize a Provider Toolkit, which included patient educational material as well as best practice information for providers. They implemented a policy that all vital signs had to be collected at each visit and that the data entry fields for the blood pressure measure were mandatory. The IT staff developed the provider and system level reporting capability for the PQRS measure and was able to meet the stage one requirement for Meaningful Use. They also began using automated vital sign monitors to download the blood pressure measurement directly into

the electronic health record. In addition, they piloted the development of a registry to track and document outreach to individual patients and compliance with follow-up appointments with continued plans for developing patient portals for patients to access their own information.

The results of their efforts over the 10-month funding period were encouraging as shown in the figure below. The percentage of patients with a documented blood pressure increased. Patients with hypertension were formally identified, and the percentage of patients with blood pressure at target (<140/90 mmHg) improved from 41% at baseline to 64% post project in September 2013.

Figure. Adult patients screened for hypertension, diagnosed for hypertension and blood pressure control rates among adult patients seen at Benefis Health System's primary care medical practices, Great Falls, Montana, 2012-2013.



The providers became aware of blood pressure control as an issue to be addressed at each visit and they participated in community events to increase awareness of hypertension. With such results, the team plans to sustain and expand its efforts in 2014 by improving the registry functions, expanding the capability of automated blood pressure data entry, adding blood pressure competency training requirements for staff, and developing physician champions for blood pressure in each department. In summary, this health care system adopted the best practices for identifying and controlling hypertension for their population using a variety of strategies supported by their electronic health record. They met the PQRS reporting criteria for screening and adopted changes in their system including registries and follow-up. The Community Transformation Grant process provided the impetus for them to review, adapt, and successfully adopt the necessary activities to improve the recognition and control of hypertension in their community, an important public health goal.